Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 1 of 22

				115 6 55 65
Debtor 1	Gina	Gayle		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if fil	ing) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	District of		
Case numb	er _			
	(If known)		-	

TENOS YOTENSMARE. 2.13 PO HE SE SEG

Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

be as complete and accurate as possible. If two married people are filing together, both are equally responsible information. Fill out all of your schedules first; then complete the information on this form. If you are filing ame your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	e for supplying correct ended schedules after you file
Part 1: Summarize Your Assets	
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	Your assets Value of what you own \$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$16998.75
1c. Copy line 63, Total of all property on Schedule A/B	s16998.75
Part 2: Summarize Your Liabilities	
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F Your total liabilities Your total liabilities	\$ <u>1800.00</u>
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$5959.84
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$4858.00

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 2 of 22

De	ebtor 1	Gina First Name	Gayle Middle Name Last Name		Case number (if known)	
			Last Halle			
P	art 4:	Answer These	e Questions for Administra	ative and Statistical Record	s	
6.	Are yo	u filing for bankr	ruptcy under Chapters 7, 11, o	r 13?		and the second s
	☐ No.	You have nothing		m. Check this box and submit this	form to the court with your off	per schodules
	Yes	3			to the dealt wan your ou	ier schedules.
7.	What ki	ind of debt do yo	ou have?	The second secon	THE RESERVE OF THE PARTY OF THE	THE RESIDENCE OF THE PROPERTY
	You	ır debts are prim	narily consumer debts. Consum	ner debts are those "incurred by a	n individual primarily for a per	sonal
		MARIE MERENANE	purpose. 11 0.0.0. § 101(6). 11	ii out lines 6-99 for statistical purp	oses. 28 U.S.C. § 159.	
	this	form to the court	orimarily consumer debts. You with your other schedules.	ı have nothing to report on this pa	rt of the form. Check this box	and submit
	ti karaman poologija karja				NAVAT PARTITION AND AND AND AND AND AND AND AND AND AN	
8.	From the Form 12	ne Statement of 1 22A-1 Line 11; OF	Your Current Monthly Income: R, Form 122B Line 11; OR, Form	Copy your total current monthly in 122C-1 Line 14.	ncome from Official	75.40.00
						\$7546.00
		THE STATE OF THE S				
9.	Copy th	e following spec	ial categories of claims from I	Part 4. line 6 of Schedule E/F		
			COLUMN CONTRACTOR CONT	and i, into a or deficulte Lit.		
					Total claim	
	From I	Part 4 on Schedu	ule E/F, copy the following:			
	9a Dom	ostio oupport ablic	nations (O			
	oa. Dom	esuc support oblig	gations (Copy line 6a.)		\$0	
1	9b. Taxe	s and certain othe	er debts you owe the governmer	nt. (Copy line 6b.)	\$1800.00	
,	9c. Claim	ns for death or per	rsonal injury while you were into	xicated. (Copy line 6c.)	s 0	
				()		
,	a. Stude	ent loans. (Copy li	ne 6f.)		\$103,000	
9	e. Oblig	ations arising out ty claims. (Copy li	of a separation agreement or di	vorce that you did not report as	\$ 0	
8	n. Debts	to pension or pro	ofit-sharing plans, and other simi	lar debts. (Copy line 6h.)	+ \$0	
9	g. Total.	. Add lines 9a thro	ough 9f.		\$ 104800.00	
					Ψ	

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 3 of 22

	to identify your case:	0 .		
Debtor 1 Gina First Name	Middle Name	Gayle Last Name		
Debtor 2 Spouse, if filing) First Name	Middle Name	Last Name		9 A 11 14
nited States Bankruptcy C	Court for the: District of Massac	husetts	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The spine of the first terms of the spine of
ase number If known)	***************************************			☐ Check if this is a
				amended filing
fficial Form 1				
tatement of	Financial Affa	irs for Indiv	iduals Filing for Bank	ruptcy 04/
. What is your current Married Not married	Is About Your Marital St	atus anu where i	ou Lived Serore	
☐ No	rs, have you lived anywher			Dates Debtor 2 lived there
□ No ▼ Yes. List all of the Debtor 1:	places you lived in the last 3	years. Do not include	e where you live now.	lived there
□ No ▼ Yes. List all of the Debtor 1:	places you lived in the last 3 www.places you lived in the last 3	years. Do not include	Debtor 2: Same as Debtor 1	lived there
No Yes. List all of the Debtor 1: 1711 Meado	places you lived in the last 3 www.places you lived in the last 3	years. Do not include Dates Debtor 1 lived there	where you live now. Debtor 2:	lived there Same as Debtor
No Yes. List all of the Debtor 1: 1711 Meado Number Stree Syracuse	places you lived in the last 3 www.places you lived in the last 3	years. Do not include Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1	lived there ☐ Same as Debtor From
No Yes. List all of the Debtor 1: 1711 Meado Number Street	places you lived in the last 3 www.divelong.com www.divelong.com	years. Do not include Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1	lived there Same as Debtor From To
No Yes. List all of the Debtor 1: 1711 Meado Number Stree Syracuse	places you lived in the last 3 www.divelous.com www.dive	years. Do not include Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1 Number Street	lived there Same as Debtor From To
No Yes. List all of the Debtor 1: 1711 Meado Number Stree Syracuse	wbrook Drive #1 NY 13224 State ZIP Code	years. Do not include Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1 Number Street City State ZIP C	lived there Same as Debtor From To
No Yes. List all of the Debtor 1: 1711 Meado Number Stree Syracuse City	wbrook Drive #1 NY 13224 State ZIP Code	years. Do not include Dates Debtor 1 lived there From 8/2019 To 8/2020	Debtor 2: Same as Debtor 1 Number Street City State ZIP 0	Ilived there Same as Debtor From To Code Same as Debtor
No Yes. List all of the Debtor 1: 1711 Meado Number Stree Syracuse City	wbrook Drive #1 NY 13224 State ZIP Code	years. Do not include Dates Debtor 1 lived there From 8/2019 To 8/2020 From	Debtor 2: Same as Debtor 1 Number Street City State ZIP C Number Street	Ilived there Same as Debtor From To Code Same as Debtor From To To
No Yes. List all of the Debtor 1: 1711 Meado Number Stree Syracuse City Number Stree	by places you lived in the last 3 by brook Drive #1 et NY 13224 State ZIP Code	years. Do not include Dates Debtor 1 lived there From 8/2019 To 8/2020 From To	Debtor 2: Same as Debtor 1 Number Street City State ZIP C Number Street	Ilived there Same as Debtor From To Code Same as Debtor From Tro Tro Code
No Yes. List all of the Debtor 1: 1711 Meado Number Stree Syracuse City Number Stree City	by places you lived in the last 3 by brook Drive #1 et NY 13224 State ZIP Code	years. Do not include Dates Debtor 1 lived there From 8/2019 To 8/2020 From To	Debtor 2: Same as Debtor 1 Number Street City State ZIP C Number Street	Ilived there Same as Debto From To Code Same as Debto From To To

Part 2: Explain the Sources of Your Income

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 4 of 22

Debtor 1	***************************************	Gayle	_	Case nu	mber (if known)		
	IIIOO NAIIO	ast Naire					
lf y	d you have any income from employm Il in the total amount of income you receivou are filing a joint case and you have in No Yes. Fill in the details.	ved from all jobs and all b	usines	ses, including part-tir	me activities	lendar year	s?
		Debtor 1			Debtor 2		
		Sources of income Check all that apply.	(b	ross income efore deductions and clusions)	Sources of income Check all that apply.	Gross ir (before d exclusion	leductions and
	From January 1 of current year until the date you filed for bankruptcy:	✓ Wages, commission bonuses, tips☐ Operating a busine	\$_	35785.87	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$	0
	For last calendar year: (January 1 to December 31 2021	Wages, commission bonuses, tips Operating a busines	\$	64673.80	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$	0
	For the calendar year before that: (January 1 to December 31,2020	Wages, commission bonuses, tips Operating a busines	æ	35565.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$	0
une gan List	I you receive any other income during lude income regardless of whether that in employment, and other public benefit pay nbling and lottery winnings. If you are filing each source and the gross income from No Yes. Fill in the details.	ncome is taxable. Exampl ments; pensions; rental in ng a joint case and you ha	les of one; ave inc	ther income are alim interest; dividends; ome that you receive	money collected from law d together, list it only onc	auitar rayalti	es; and otor 1.
٠		Debtor 1			Debtor 2		
		Sources of income Describe below.	ead (bet	oss income from th source fore deductions and lusions)	Sources of income Describe below.	each sour	ductions and
	From January 1 of current year until the date you filed for bankruptcy:	Adoption Subsidy	\$	3300.00	700 - 700 -	\$	0
	the date you filed for bankruptcy:		\$			\$	0
			\$		- 1741 - 1741 - 1741 - 1741 - 1741 - 1741 - 1741 - 1741 - 1741 - 1741 - 1741 - 1741 - 1741 - 1741 - 1741 - 174	\$	0
	For last calendar year:	Adoption Subsidy	\$	12,000.00		¢.	0
	(January 1 to December 312021)		\$	0		Ф \$	0
	YYYY		\$	0	70.	\$	0
	For the calendar year before that:	Adoption Subsidy	\$	12,000.00		e	0
	(January 1 to December 312020)		\$	0		φ	0

0

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 5 of 22

Debtor 1	Gina		Gayle	Case nu	mber (if known)	
	First Name Middle Na	me Last Name	50			_
Part 3:	List Certain Payn	nents You Made Be	fore You Filed	for Bankruptcy		
6. Are ei	ther Debtor 1's or Deb	otor 2's debts primarily	y consumer debi	ts?		
□ No	o. Neither Debtor 1 no "incurred by an indiv	or Debtor 2 has primar idual primarily for a pen	rily consumer de sonal, family, or h	bts. Consumer debts are nousehold purpose."	defined in 11 U.S.C. § 101	(8) as
	During the 90 days t	pefore you filed for bank	ruptcy, did you p	ay any creditor a total of \$	7,575* or more?	
	No. Go to line 7.					
	total amour	nt you paid that creditor.	Do not include p	\$7,575* or more in one or ayments for domestic sup nents to an attorney for thi	port obligations, such as	
				at for cases filed on or aft		
VÍ va		2 or both have primar			ander (1995) - 1996 (1995) - 1996 (1995) - 1996 (1995) - 1996 (1995) - 1996 (1995) - 1996 (1995) - 1996 (1995)	
- 10				ous. ay any creditor a total of \$	600 or more?	
	□ No. Go to line 7.		,,	-,,		
	AT THE PROPERTY OF THE PROPERT			Value of the second	IV MANA VERSIONES IN	
	creditor. Do	not include payments t	for domestic supp	\$600 or more and the tota out obligations, such as cl by for this bankruptcy case	rild support and	
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Capital One		April 2022	\$ 940.00	s 10525.00	☐ Mortgage
	Creditor's Name					☐ Car
	P.O.Box 710)83	May 2022			☑ Credit card
	Hamber Secti					Loan repayment
						☐ Suppliers or vendors
	Charlotte City	NC29 State ZiP Code				Other
	Olly	Glate ZIF Code	•			
				\$	\$	
	Creditor's Name		-	Ψ	Ψ	☐ Mortgage
						☐ Car
	Number Street					Credit card
			_			Loan repayment
						Suppliers or vendors
	City	State ZIP Code				Other
				\$	\$	☐ Mortgage
	Creditor's Name	······································		*	7	Car
	***************************************		_			Credit card
	Number Street					Loan repayment
		***************************************				Suppliers or vendors
			_			Other
	City	State ZIP Code				

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 6 of 22

otor 1	Gina First Name	MALL N	Gayle	_	Case number (if known	1)
	Pirst Name (Middle Name Last Name			Access of the control	
corpo agen such	ners include your re orations of which you or, including one for as child support a	ou are an officer, director, p r a business you operate as nd alimony.	s; relatives of any erson in control o	general partners; or owner of 20% or	partnerships of which	who was an insider? ch you are a general partner; g securities; and any managing or domestic support obligations,
	es. List all paymer	ns to an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name			\$	\$	
	Number Street	<u> </u>				
	· · · · · · · · · · · · · · · · · · ·					9 8 9
	Сііу	State ZIP Code	_			
i	insider's Name	** ***********************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$	\$	
i	Number Street	***************************************				
į	City	State ZIP Code	***************************************			
nolud No	e payments on det	u filed for bankruptcy, did ots guaranteed or cosigned s that benefited an insider.	by an insider.		fer any property o	n account of a debt that benefited
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment include creditor's name
Īr	nsider's Name	<u> </u>		\$	\$	
N	lumber Street	***				
c	ity	State ZIP Code			15 10 10	
Īn	sider's Name			\$	\$	
Ni	umber Street				w.	
-					to	
Cli	tv	State ZIP Code	<u>-</u> 8		\$3 Val	

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 7 of 22

Debtor 1	Gina		Gayle	Case number (if known)		
	First Name Middle Name	Last Name		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Part 4	Identify Legal Action	ne Ronoscossio	ne and Earaniacu	FOC		
9. With	in 1 year before you filed t	or bankruptcy, we	re you a party in any	lawsuit, court action, or admir	nistrative proce	eding?
and a	ontract disputes.	ersonal injury cases	, small claims actions,	divorces, collection suits, paterr	nity actions, supp	port or custody modifications
27						
Z						
LI 1	es. Fill in the details.					
		Natu	re of the case	Court or agency		Status of the case
		5				
	Case title	-		Court Name		Pending
						On appeal
				Number Street		Concluded
						- Concidera
	Case number			City State	ZIP Code	19
		92 92		Oily State	ZIF COUR	
				e		
	Case title			Court Name		Pending
						On appeal
				Number Street		Concluded
	Case number					
				City State	ZIP Code	 -
		Ø-		25		
ц ү	es. Fill in the information be	low.	Describe the prope	ertv	Date	Value of the property
			addition the prope	,	Date	value of the property
	Creditor's Name		- :			
	Number Street	382.	Explain what happ	ened		
			Property was			

	City	Ch. 170 0 4	Property was Property was			
	City	State ZIP Code	□ Property was	attached, seized, or levied.		
			Describe the prope	erty	Date	Value of the property
					W 0	
					10 10	\$
	Creditor's Name				:	· • • • • • • • • • • • • • • • • • • •
	Number Street		The province of their		**	
			Explain what happe	ened		
			_ Property was	repossessed.		
			Property was			
			Property was			
	City	State ZIP Code	_	attached, seized, or levied.		
			- Toperty was			

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 8 of 22

otor 1	Gina		Gayle	Case number (if known)		
	First Name	Middle Name Last N	ame			
		re you filed for bankrup to make a payment bec		a bank or financial institution,	set off any ar	nounts from your
Z		to make a payment bee	aude you owed a debt.			
	Yes. Fill in the de	tails.				
			Describe the action the creditor		ate action	Amount
1	Creditor's Name			W	ras taken	
						\$
Î	Number Street			-1		Ψ
	·			5 U 5000		
ļ	City	State ZIP Code	Last 4 digits of account number	r. XXXX		
. Witi	nin 1 vear before	vou filed for bankrupte	v. was any of your property in	the possession of an assignee	for the benef	it of
cred	ditors, a court-ap		todian, or another official?	p		
Z I						
	Yes					
art 5	List Certain	n Gifts and Contribu	tions			
		e you filed for bankrupt	cy, did you give any gifts with	a total value of more than \$600	per person?	
ZÍ.						
	Yes. Fill in the de	tails for each gift.				
	Gifts with a total	value of more than \$600	Describe the gifts	D	ates you gave	Value
	per person		State Control de primation de la control de		ne gifts	
ī	Person to Whom You (Gave the Gift		* -		\$
						¢
			i N		<u>.::-</u>	Ψ
ì	Number Street					
ō	City	State ZIP Code				
1	Person's relationshi	p to you				
	1074 C.N. SHARK: MASAGERASE	sessi Si arris especiment		2		
	Gifts with a total va per person	alue of more than \$600	Describe the gifts		ates you gave ne gifts	Value
				20.00		
ī	Person to Whom You G	Save the Gift		-		\$
	albon to vindin 100 C	Save the Oile				
-				₂ (-		\$
				9		
Ī	Number Street	9		9		
-	21t.	0.4				
(City	State ZIP Code				
ī	Person's relationship	p to you				

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 9 of 22

or 1	Gina	Gayle Case no	umber (if known)	
	First Name Middle Name Le	sst Name		
17941				
		uptcy, did you give any gifts or contributions wit	h a total value of more than \$	600 to any charity?
Z				
7 /	es. Fill in the details for each gift or co	ntribution.		
	Gifts or contributions to charities	Describe what you contributed	Data	M-t
	that total more than \$600	Describe what you contributed	Date you contributed	Value
č	harity's Name			\$
		8		
-			n	\$
N	lumber Street	- ,		
		8		
			# # # # # # # # # # # # # # # # # # #	
C	ity State ZIP Code	======================================		
6:	List Certain Losses			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
			ė.	\$
			:	-
7;	List Certain Payments or Trai	and and		
2.0				
ithi	n 1 year before you filed for bankrup	otcy, did you or anyone else acting on your beha	if pay or transfer any propert	y to anyone
ou c	consulted about seeking bankruptcy	or preparing a bankruptcy petition?		
		reparers, or credit counseling agencies for services	required in your bankruptcy.	
N				
Υ	es. Fill in the details.			
		Description and value of any property transferred	Date payment or	Amount of paymer
		and the control of any property abundanted	transfer was	Amount or paymen
J	Person Who Was Paid		made	
ī	Number Street			\$
_		si con		
				\$
(City State ZIP Code			
Ē	mall or website address	10		
			48	
Ë	Person Who Made the Payment, if Not You		***	

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 10 of 22

First Name 1	Middle Name Las	Gayle st Name	Case number (if known)		5-1-1-1
	MILAIO LES	or Hound			
	A A A A A A A A A A A A A A A A A A A	Description and value of any propert	y transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid					
Number Street		 "			\$
1000000000 00000000		_		• <u>••••••••</u>	\$
**************************************				4	
City	State ZIP Code				
Email or website address	s				
Person Who Made the P	Payment, if Not You				
No Yes. Fill in the detai	ils.	Description and value of any property	y transferred	Date payment or	Amount of pa
		_	y maringangan (II)	transfer was made	zanount or p
Person Who Was Paid					ď
Number Street		nee,			Ψ
		<u> </u>			
City	State ZIP Code	: - ,			\$
hin 2 years before asferred in the ordi ude both outright tra	you filed for bankru inary course of your ansfers and transfers I transfers that you ha	ptcy, did you sell, trade, or otherwise business or financial affairs? made as security (such as the granting ave already listed on this statement.			
hin 2 years before asferred in the ording the both outright transport include gifts and No	you filed for bankru inary course of your ansfers and transfers I transfers that you ha	r business or financial affairs? made as security (such as the granting		ortgage on your properties	
hin 2 years before asferred in the ording the both outright transport include gifts and No	you filed for bankru inary course of your ansfers and transfers I transfers that you ha	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or m Describe any property	ortgage on your properties	perty). Date tran
hin 2 years before asferred in the ording the ordinary the ordinar	you filed for bankru inary course of your ansfers and transfers I transfers that you ha	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or m Describe any property	ortgage on your properties	perty). Date tran
hin 2 years before asferred in the ording the ording the ording transfer of the ording transfer or	you filed for bankru inary course of your ansfers and transfers I transfers that you ha	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or m Describe any property	ortgage on your properties	perty). Date tran
hin 2 years before asferred in the ordinude both outright transfer include gifts and No Yes. Fill in the detail	you filed for bankru inary course of your ansfers and transfers I transfers that you ha ils. ransfer	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or m Describe any property	ortgage on your properties	perty). Date tran
hin 2 years before asferred in the ordinate both outright transfer include gifts and No Yes. Fill in the detain Person Who Received Tournber Street	you filed for bankru inary course of your ansfers and transfers it transfers that you ha ils. Transfer State ZIP Code to you	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or m Describe any property	ortgage on your properties	perty). Date tran
hin 2 years before asferred in the ordinate both outright transfer include gifts and No Yes. Fill in the detail Person Who Received T Number Street City Person's relationship	you filed for bankru inary course of your ansfers and transfers it transfers that you ha ils. Transfer State ZIP Code to you	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or m Describe any property	ortgage on your properties	perty). Date tran
hin 2 years before asferred in the ordinate both outright transfer include gifts and No Yes. Fill in the detail Person Who Received To The Person's relationship Person Who Received To The Total	you filed for bankru inary course of your ansfers and transfers it transfers that you ha ils. Transfer State ZIP Code to you	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or m Describe any property	ortgage on your properties	perty). Date tran

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 11 of 22

	Gina	Gayle	Case number (if kni	own)	
	First Name Middle Name La	st Name			
Nith	nin 10 years before you filed for bankr	uptcy, did you transfer any proper	ty to a self-settled trus	st or similar device of w	hich you
are ·	a beneficiary? (These are often called	asset-protection devices.)			
Ø i					
□ ·	Yes. Fill in the details.				
		Description and value of the prope	rtv transferred		Date transfer
					was made
ı	Name of trust	- .			
2		T			
-		_			
		**************************************	**************************************		the barber bushmade should allow four parameter than our measures as the second as a second of the s
-	List Certain Financial Accoun				
	hin 1 year before you filed for bankrup	otcy, were any financial accounts o	or instruments held in	your name, or for your	benefit,
	sed, sold, moved, or transferred? lude checking, savings, money marke	t or other financial accounts: cort	ificates of denocity cha	arae in hanke cradit un	ione
roi	kerage houses, pension funds, coope	ratives, associations, and other fir	nancial institutions.	ares in Darins, Credit un	iions,
1	No				
]	Yes. Fill in the details.				
		Last 4 digits of account number	Type of account or	Date account was	Last balance before
			instrument	closed, sold, moved, or transferred	closing or transfer
	Name of Financial Institution		☐ Checking		\$
	Number Street		☐ Savings		3
			☐ Money market		
			☐ Brokerage		
	City State ZIP Code	-	Brokerage Other		
	City State ZIP Code	- - - - -	Other		•
	City State ZIP Code Name of Financial Institution	_ xxxx	Other		\$
	Name of Financial Institution	_ xxxx- <u> </u>	Other		\$
		_ XXXX	☐ Other ☐ Checking ☐ Savings ☐ Money market		\$
	Name of Financial Institution	_ xxxx	Other		\$

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 12 of 22

	Gina		Gayle	Case number (if known)	
	First Name	Middle Name	Last Name	out that the state of the state	
Have	Voll stored prop	orbi in a etarage	nit an alana attanati		
ZIN	jou stoleu plop	erty in a storage u	nit or place other than your home	within 1 year before you filed for bankruptc	y?
☐ Y	es. Fill in the det	tails.			
			Who else has or had access to it	t? Describe the contents	Do you stil
					have it?
	Name of Storage Fac	ility	Name		☐ No
		,	Name		☐ Yes
	Number Street		Number Street		
	C#.		CityState ZIP Code		
	City	State ZIP Code			
art 9:	Identify P	roperty You Hol	d or Control for Someone Else		
. Do y				y property you borrowed from, are storing fo	
OI III	na in trust for so	omeone.	commonic cise owns : include any	y property you norrowed from, are storing for	or,
	lo 'es. Fill in the de				
— 1	es. Fill in the de	tails.	1971		
			Where is the property?	Describe the property	Value
	Owner's Name		_		
					\$
					Y
	Number Street		Number Street		
	Number Street		Number Street		
	Number Street	State ZIP Code		ZIP Code	
	City	1000000 0000 0 000 0	City State	ZIP Code	
rt 10	City Give Deta	ils About Enviro	City State	ZIP Code	
er t 10	Give Deta	ils About Environ	City State :		
ert 10 r the p Environthazar	Give Deta Durpose of Part 1 conmental law medicus or toxic su	ils About Environ 10, the following de eans any federal, so	City State :	concerning pollution, contamination, releas	
rt 10 r the p Environ hazar includ Site m	Give Detainmental law medicus or toxic suding statutes or means any locatic	ils About Environ 0, the following de eans any federal, si bstances, wastes, regulations control on, facility, or prop	City State and mental information finitions apply: tate, or local statute or regulation of or material into the air, land, soil, so	concerning pollution, contamination, releas surface water, groundwater, or other mediu ces, wastes, or material.	es of m,
rt 10 r the p Environ hazar includ Site m utilize	Give Deta ourpose of Part 1 conmental law me dous or toxic su ding statutes or in teans any location of tor used to ow	ils About Environ 10, the following de eans any federal, so obstances, wastes, regulations control on, facility, or prop //n, operate, or utilia	city State : nmental information finitions apply: iate, or local statute or regulation of or material into the air, land, soil, sling the cleanup of these substance ity as defined under any environment, including disposal sites.	concerning pollution, contamination, releas surface water, groundwater, or other mediu ces, wastes, or material. mental law, whether you now own, operate,	es of m,
rt 10 r the p Enviro hazar includ Site m utilize Hazar	Give Deta Durpose of Part 1 conmental law me dous or toxic su ding statutes or ineans any location at tor used to ow dous material m	ils About Environ 10, the following de eans any federal, so ibstances, wastes, regulations control on, facility, or prop on, operate, or utiliz eans anything an e	city State : nmental Information finitions apply: iate, or local statute or regulation of or material into the air, land, soil, sling the cleanup of these substance of the second of	concerning pollution, contamination, releas surface water, groundwater, or other mediu ces, wastes, or material. mental law, whether you now own, operate,	es of m,
rt 10 r the p Environ hazar includ Site m utilize Hazar subst	Give Deta Durpose of Part 1 conmental law me dous or toxic su ding statutes or in neans any location it or used to ow dous material me ance, hazardous	ils About Environ 10, the following de eans any federal, so ibstances, wastes, regulations control on, facility, or prop rn, operate, or utiliz eans anything an es material, pollutant	nmental Information finitions apply: tate, or local statute or regulation of or material into the air, land, soil, sling the cleanup of these substancerty as defined under any environmental law defines as a hazer, contaminant, or similar term.	concerning pollution, contamination, releas surface water, groundwater, or other mediu ces, wastes, or material. mental law, whether you now own, operate, cardous waste, hazardous substance, toxic	es of m,
r the p Environ hazar includ Site m utilize Hazar substa	Give Deta Durpose of Part 1 conmental law me dous or toxic su ding statutes or i neans any locatio a it or used to ow dous material m ance, hazardous I notices, release	ils About Environ 10, the following de eans any federal, so abstances, wastes, regulations control on, facility, or prop //n, operate, or utilize eans anything an earmaterial, pollutant es, and proceeding	nmental Information finitions apply: tate, or local statute or regulation of or material into the air, land, soil, sling the cleanup of these substancerty as defined under any environmental into the second sites. Invironmental law defines as a haze, contaminant, or similar term.	concerning pollution, contamination, releas surface water, groundwater, or other mediu ces, wastes, or material. mental law, whether you now own, operate, ardous waste, hazardous substance, toxic s of when they occurred.	es of m,
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rt 10 r the p Environ hazar includ Site m utilize Hazar substa	Give Detain ourpose of Part 1 commental law medous or toxic surpling statutes or inceans any location it or used to own adous material meance, hazardous I notices, released by governmental our	ils About Environ 10, the following deleans any federal, so ibstances, wastes, regulations control 10, facility, or prop 11, operate, or utilize 12 eans anything an elematerial, pollutant 13 es, and proceeding 15 unit notified you the	nmental Information finitions apply: tate, or local statute or regulation of or material into the air, land, soil, sling the cleanup of these substancerty as defined under any environmental law defines as a haze, contaminant, or similar term. Is that you know about, regardless that you may be liable or potentially	concerning pollution, contamination, releas surface water, groundwater, or other mediuces, wastes, or material. mental law, whether you now own, operate, ardous waste, hazardous substance, toxic of when they occurred.	es of m, or ental law?
r the period for the	Give Detain ourpose of Part 1 commental law medous or toxic surpling statutes or inceans any location it or used to own adous material meance, hazardous I notices, released by governmental our	ils About Environ 10, the following deleans any federal, so ibstances, wastes, regulations control 10, facility, or prop 11, operate, or utilize 12 eans anything an elematerial, pollutant 13 es, and proceeding 15 unit notified you the	nmental Information finitions apply: tate, or local statute or regulation of or material into the air, land, soil, sling the cleanup of these substancerty as defined under any environmental into the second sites. Invironmental law defines as a haze, contaminant, or similar term.	concerning pollution, contamination, releas surface water, groundwater, or other mediu ces, wastes, or material. mental law, whether you now own, operate, ardous waste, hazardous substance, toxic s of when they occurred.	es of m,
art 10 r the p Environ hazar includ Site m utilize Hazar substa port al Has ar	Give Detain ourpose of Part 1 commental law mediaus or toxic suding statutes or interest of the it or used to own and mance, hazardous I notices, released by governmental of s. Fill in the detail	ils About Environ 10, the following deleans any federal, so ibstances, wastes, regulations control 10, facility, or prop 11, operate, or utilize 12 eans anything an elematerial, pollutant 13 es, and proceeding 15 unit notified you the	nmental Information finitions apply: tate, or local statute or regulation of or material into the air, land, soil, sling the cleanup of these substance of the	concerning pollution, contamination, releas surface water, groundwater, or other mediuces, wastes, or material. mental law, whether you now own, operate, ardous waste, hazardous substance, toxic of when they occurred.	es of m, or ental law?
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art 10 If the p Environ hazar includ Site m utilize Hazar subst: port al Has ar No Ye	Give Deta Durpose of Part 1 conmental law me dous or toxic su ding statutes or i neans any locatic at or used to ow dous material m ance, hazardous I notices, release my governmental s. Fill in the deta	ils About Environ 10, the following deleans any federal, so ibstances, wastes, regulations control 10, facility, or prop 11, operate, or utilize 12 eans anything an elematerial, pollutant 13 es, and proceeding 15 unit notified you the	nmental Information finitions apply: tate, or local statute or regulation of or material into the air, land, soil, sling the cleanup of these substance of the	concerning pollution, contamination, releas surface water, groundwater, or other mediuces, wastes, or material. mental law, whether you now own, operate, ardous waste, hazardous substance, toxic of when they occurred.	es of m, or ental law?

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 13 of 22

or 1 Gin		lie Name	Lac	Gayle	Case number	(if known)	
(naci	vamo mad	io (valile	Los	, raind			
	otified any go	vernm	nental unit o	of any release of hazardous mate	rial?		
No No	in the details						
Tes. Fili	in the details	5.		Governmental unit	Environmental faw	v. if you know it	Date of notice
						, i you allow t	bate of notice
Name of	site			Governmental unit			
Number	Street			Number Street			
-		 		City State ZIP Code	_		
City		State	ZIP Code				
•							
	en a party in	any ju	idicial or ad	lministrative proceeding under a	ny environmental la	w? Include settlements	and orders.
A No							
Yes. Fill	in the details	3.					
				Court or agency	Nature of the	e case	Status of the case
Case title	,			Court Name			Pending
				Courteant			On appea
				Number Street			☐ Conclude
Case num	nber						
				City State ZIP C	ode		
11: G	ive Details	Abou	t Your Bu	siness or Connections to An	ıv Business		
				ptcy, did you own a business or		wing connections to an	w hueinace?
☐ A sol	e proprietor	or self	f-employed	in a trade, profession, or other a	ctivity, either full-tir	ne or part-time	y business i
☑ A me	mber of a lin	nited li	ability com	pany (LLC) or limited liability pa	rtnership (LLP)		
	rtner in a par				37 SE		
				xecutive of a corporation			
An or	wner of at lea	ast 5%	of the votir	ng or equity securities of a corpo	oration		
No. None	e of the abov	e appl	ies. Go to P	Part 12.			
Yes. Che	ck all that ap	ply at	ove and fill	in the details below for each bu	siness.		
Gina G	ayle Media	a, LLC	2	Describe the nature of the busine	es	Employer Identification no Do not include Social Sec	
16781 Number	Chagrin Bl	vd		Photography and media		EIN: 4 6 -5 2	3 0 0 0 2
number	उत्तरथा.			Name of accountant or bookkeep	эег	Dates business existed	
Chaka	r Uaiahta	OLI	44400	Self		From2014 To 20	122
City	r Heights	OH State	44122 ZIP Code			11011-011-1020	
				Describe the nature of the busine	ess	Employer Identification nu	ımber
Business	Name					Do not include Social Sec	urity number or ITIN.
Number	Street					EIN:	
. TWILING!	211401			Name of accountant or bookkeep	er	Dates business existed	
M 						From To	
City		State	ZIP Code			10	

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 14 of 22

	Gina		Gayle	Case number (if known)
	First Name Middle Name	Last Name		eace named (namen)
		Desc	cribe the nature of the business	Employer Identification number
	Business Name			Do not include Social Security number or ITIN. EIN:
	Number Street	Name	e of accountant or bookkeeper	Dates business existed
	City State	ZIP Code		From To
Z N	tutions, creditors, or other	parties.	you give a financial stateme	nt to anyone about your business? Include all financial
	Name			
	Name	MM / D	DD / YYYY	
	Number Street			
9				
- 0				
	City State	ZIP Code		
8	City State	ZIP Code		
		ZIP Code		
		ZIP Code		
I hav	Sign Below we read the answers on this wers are true and correct. I	s Statement of Fina		nents, and I declare under penalty of perjury that the sealing property, or obtaining money or property by fraud
I hav	Sign Below we read the answers on this wers are true and correct. I	s Statement of Fina understand that m		nents, and I declare under penalty of perjury that the sealing property, or obtaining money or property by fraud risonment for up to 20 years, or both.
I hav	Sign Below we read the answers on this wers are true and correct. I connection with a bankrupto	s Statement of Fina understand that m		
I have answer	ve read the answers on this wers are true and correct. I connection with a bankrupto J.S.C. §§ 152, 1341, 1519, ar	s Statement of Fina understand that m		
I have answer	Sign Below we read the answers on this wers are true and correct. I connection with a bankrupto	s Statement of Fina understand that m		
I have answer in control 18 U	ve read the answers on this wers are true and correct. I connection with a bankrupto J.S.C. §§ 152, 1341, 1519, ar	s Statement of Fina understand that m	aking a raise statement, cond n fines up to \$250,000, or imp	
I have answer	ve read the answers on this wers are true and correct. I connection with a bankrupto. S.C. §§ 152, 1341, 1519, are ignature of Debtor 1	s Statement of Final understand that m by case can result in d 3571.	aking a raise statement, cond in fines up to \$250,000, or imp Signature of Debtor 2	risonment for up to 20 years, or both.
I have answin control 18 U	ve read the answers on this wers are true and correct. I connection with a bankrupto. S.C. §§ 152, 1341, 1519, are ignature of Debtor 1	s Statement of Final understand that m by case can result in d 3571.	aking a raise statement, cond in fines up to \$250,000, or imp Signature of Debtor 2	
I have answer in control 18 U	ve read the answers on this wers are true and correct. I connection with a bankrupto I.S.C. §§ 152, 1341, 1519, and ignature of Debtor 1 vou attach additional pages No Yes	s Statement of Final understand that m try case can result in d 3571.	aking a raise statement, cond in fines up to \$250,000, or imp Signature of Debtor 2	realing property, or obtaining money or property by fraud prisonment for up to 20 years, or both.
I have answin control 18 U	Sign Below We read the answers on this wers are true and correct. I connection with a bankrupto I.S.C. §§ 152, 1341, 1519, and ignature of Debtor 1 Parts 07/29/20 3 and on the control of the control	s Statement of Fina understand that may case can result in 3571. Sto Your Statement of Fina understand that may case can result in 3571.	aking a raise statement, cond in fines up to \$250,000, or imp Signature of Debtor 2 Date t of Financial Affairs for Indiv	realing property, or obtaining money or property by fraud prisonment for up to 20 years, or both.

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page **12**

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 15 of 22

Debtor 1	Gina		Gavle
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if fil	ing) First Name	Middle Name	Last Name
United Stat		the: District of Massachus	setts

Check one box only as directed in this form and in Form 122A-1Supp:			
1. There is no presumption of abuse. 2. The Calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2). 3. The Means Test does not apply now because of qualified military service but it could apply later.			

☐ Check if this is an amended filing

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

	Part 1: Calculate Your Current Monthly Income						
*	 What is your marital and filing status? Check one only. ✓ Not married. Fill out Column A, lines 2-11. ✓ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. ✓ Married and your spouse is NOT filing with you. You and your spouse are: 						
	Living in the same household and are not legally separated. Fill out both Colo	umns A and B, lines	2-11.				
	Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).						
	Fill in the average monthly income that you received from all sources, derived durin bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the August 31. If the amount of your monthly income varied during the 6 months, add the income fill in the result. Do not include any income amount more than once. For example, if both some from that property in one column only. If you have nothing to report for any line, writing the source of the source	the 6-month period we me for all 6 months a	vould be March 1 through				
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse				
2.	 Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 	\$ <u>6196,</u> 04	\$0				
3.	 Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 	\$ 0	\$ 0				
4.	4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents,						
5.	Net income from operating a business, profession, or farm Debtor 1 Debtor 2		\$ 0,000 pt				
	Gross receipts (before all deductions) \$\$		> 2				
	Ordinary and necessary operating expenses -\$ -\$						
	Net monthly income from a business, profession, or farm \$0 \$0 copy	\$ <u>O</u>	\$0 E COUR.				
6.	Net income from rental and other real property Gross receipts (before all deductions) Debtor 1 S						
	Ordinary and necessary operating expenses -\$\$						
	Net monthly income from rental or other real property \$0 \$0 here	40	\$0				
7.	Interest, dividends, and royalties	\$ 0	\$ 0				

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 16 of 22

Debtor 1	Gina First Name Middle Name	Gayle	Case number (# known)
	rust rame Microe Name	Last Name	
			Column A Column B Debtor 1 Debtor 2 or non-filing spouse
8. Ur	nemployment compensation		s 0 s 0
De ur	ider the Social Security Act. Inste	tend that the amount received was a beneficad, list it here:	
dred awar driven	For you	1 11 11 11 11 11 11 11 11 11 11 11 11 1	
1	For your spouse	T	
no Ur dis pa	enefit under the Social Security Ar ot include any compensation, pen- nited States Government in conne sability, or death of a member of t ty paid under chapter 61 of title 10 tes not exceed the amount of retifices	o not include any amount received that was ct. Also, except as stated in the next senten sion, pay, annuity, or allowance paid by the ection with a disability, combat-related injury the uniformed services. If you received any 0, then include that pay only to the extent the red pay to which you would otherwise be er 0 other than chapter 61 of that title.	ce, do or retired et it
10. Ind Do as ter Str de se	come from all other sources no onot include any benefits receive a victim of a war crime, a crime a crorism; or compensation, pension ates Government in connection w ath of a member of the uniformed parate page and put the total belo	of listed above. Specify the source and amed under the Social Security Act; payments reagainst humanity, or international or domest n, pay, annuity, or allowance paid by the Unrith a disability, combat-related injury or disable services. If necessary, list other sources of	eceived ic ited
<u> </u>	Part-time work, hours vary		\$ <u>8</u> 00 <u>\$</u> 0
_		-	\$O \$O
T	otal amounts from separate page	s, if any.	+\$ 0 +\$ 0
11. Ca col	umn. Then add the total for Colu	hly income. Add lines 2 through 10 for eac mn A to the total for Column B. Means Test Applies to You	\$ 7546.00 + \$ 0 = \$7546.00 Total current monthly income
		come for the year. Follow these steps:	
12a	. Copy your total current month	ly income from line 11	
	Multiply by 12 (the number of		x 12
12b	y out annual most		12b. \$ <u>90552.0</u> 0
		ne that applies to you. Follow these steps:	
	in the state in which you live.	Massachusetts	
1-111	in the number of people in your h	ousehold. 3	
101	find a list of applicable median inc	our state and size of household come amounts, go online using the link spe y also be available at the bankruptcy clerk's	sified in the separate soffice.
14. Hov	w do the lines compare?		
14a.	Line 12b is less than or equal Go to Part 3.	al to line 13. On the top of page 1, check bo	x 1, There is no presumption of abuse.
14b.	Line 12b is more than line 1: Go to Part 3 and fill out Form	3. On the top of page 1, check box 2, <i>The p</i> n 122A–2.	resumption of abuse is determined by Form 122A-2.

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 17 of 22

Debtor 1	Gina First Name Middle Name Last Nam	Gayle	Case number (if known)
Part 3	Sign Below		
	By signing here, I declare under penalt	ty of perjury that the information on the	this statement and in any attachments is true and correct.
	Signature of Debtor 1	The !	Signature of Debtor 2
Addition and the second	Date 61/29/2022		Date
	If you checked line 14a, do NOT fill		
	If you checked line 14b, fill out Forr	m 122A–2 and file it with this form.	
	Print Save As	Add Attachment	Reset

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 18 of 22

				6 11 4 17
Debtor 1	Gina	Gayle		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	ng) First Name	Middle Nama	Last Name	
United State Case numbe (If known)		r the: District of Massachu	setts	

A A A LU Check if this is an amended filling

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in information below.				
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?		
Creditor's name: Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes		
Creditor's name: Description of property securing debt:	☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:	☐ No ☐ Yes		
Creditor's name: Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes		
Creditor's name: Description of property securing debt:	☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:	□ No □ Yes		

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 19 of 22

Gina Debtor 1 Gayle Case number (If known) Part 2: **List Your Unexpired Personal Property Leases** For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? Lessor's name: ☐ No Description of leased ☐ Yes property: Lessor's name: ☐ No Description of leased ☐ Yes property: Lessor's name: □ No Description of leased ☐ Yes property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. Signature of Debtor 1 Signature of Debtor 2 Date 07/29/2022 Date MM / DD / YYYY

Official Form 108

Print

Statement of Intention for Individuals Filing Under Chapter 7

page 2

CERTIFICATE OF COUNSELING

I CERTIFY that on <u>July 8, 2022</u>, at <u>3:39</u> o'clock <u>PM EDT</u>, <u>Gina Gayle</u> received from <u>American Consumer Credit Counseling</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the <u>District of Massachusetts</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: July 8, 2022

By: /s/Jennifer Papa

Name: Jennifer Papa

Title: Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. 109(h) and 521(b).

Case 22-11086 Doc 2 Filed 07/29/22 Entered 07/29/22 12:05:12 Desc Main Document Page 21 of 22

United States Bankruptcy Court District of Massachusetts

E.O. DAMERUPTOY COURT 2012 JUL 29 A 11: 44

Inre Gina Gayle

Chapter Chapter 7

Debtor

VERIFICATION OF MATRIX

The above-named debtor(s) verify(ies) unde	r penalty of perjury that the attached List of
Creditors, which consists of pages an	d a total of $\overset{\mathcal{S}}{=}$ creditors, is true, correct
and complete to the best of my knowledge.	
Date: 7-29-20 22	Debtor
	Joint Debtor

Matrix List of Creditors for Gina Gayle

Internal Revenue Service 310 Lowell St. Stop 360 Andover, MA 01810

Affirm, Inc. 30 Isabella Street, Floor 4 Pittsburg, PA 15212

Capital One P.O. Box 71093 Charlotte, NC. 28272-1083 Account ending in 0623

Capital One P.O. Box 71093 Charlotte, NC 28272-1083 Account ending in 3736

CenturyFirst FCU 3318 Hardy Street Hattiesburg, MS 39401-0696

PayPal Credit / Synchrony Bank P.O. Box 960006 Orlando, FL 32896-0006

Elan Financial Services P.O. Box 108 Saint Louis, MO 63166

Nationwide Financial Services 3525 Del Mar Heights Rd., Suite 857 San Diego, CA 92130